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CONFIRMATION NO. 8053

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
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| 10/533,928 | 07/29/2005 | 128 | 3771 | 4398-427 |
| APPLICANTS Michael Berthon-Jones, Leonay, AUSTRALIA; Peter Edward Bateman, Cherrybrook, AUSTRALIA; Donald Darkin, Dural, AUSTRALIA; Robin Garth Hitchcock, North Parramatta, AUSTRALIA; Philip James Jenkinson, Epping, AUSTRALIA; Susan Robyn Lynch, Epping, AUSTRALIA; Gordon Joseph Malouf, Gympsea Bay, AUSTRALIA; Patrick John McAuliffe, Epping, AUSTRALIA; Milind Chandrakant Raje, Wentworthville, AUSTRALIA; Gary Christopher Robinson, East Killara, AUSTRALIA; Richard Sokolov, Earlwood, AUSTRALIA; Philip Thomas Stallard, Denistone East, AUSTRALIA; Michael Kassipillai Gunaratnam, Marsfield, AUSTRALIA; | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/AU03/01471 11/06/2003 which claims benefit of 60/424,005 11/06/2002 and claims benefit of 60/447,327 02/14/2003 * and claims benefit of 60/488,752 07/22/2003 * and claims benefit of 60/503,896 09/22/2003 * (*)Data provided by applicant is not consistent with PTO records. | | | | |
| ** FOREIGN APPLICATIONS ***** <div style="float: right; border: 1px solid black; padding: 2px;">Yes /CTO/</div> | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** <div style="float: right; border: 1px solid black; padding: 2px;">None /CTO/</div> | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /CLINTON T OSTRUP/ Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY AUSTRALIA | SHEETS DRAWINGS 90 | TOTAL CLAIMS 33 |
| INDEPENDENT CLAIMS 11 | | | | |
| ADDRESS NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203 UNITED STATES | | | | |
| TITLE Mask and components thereof | | | | |
| FILING FEE RECEIVED 3780 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) | |

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